

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORKMarlon Roberts

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

New York City  
New York City Law Department  
100 Church Street  
New York, NY 10007  
John Doe Officer #1  
John Doe Officer #2Jury Trial: ☒ Yes ☐ No  
(check one)Civ. 08561 (ER)

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

## I. Parties in this complaint:

- A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff's

Name Marlon RobertsID# 73400054Current Institution MCCAddress 150 Park Row NY, NY 10007

- B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1

Name John Doe Officer #1 Shield #Where Currently Employed 49th Precinct NY PDAddress 4111 E 230 St LACONIA 10469

**DEFENDANTS AND SERVICE ADDRESSES**

New York City  
New York City Law Department  
100 Church Street  
New York, NY 10007

6. Is the case still pending? Yes ☒ No ☐  
If NO, give the approximate date of disposition \_\_\_\_\_
7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 29 day of December, 2017.

Signature of Plaintiff

Inmate Number

Institution Address

Marlon Roberts  
73400054  
MCC  
150 Park  
New York, NY 10007

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this 29 day of December, 2017 I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff:

Marlon Roberts

VI. Previous lawsuits:

On  
these  
claims

- A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes ☒ No ☐

- B. If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff Marlon Roberts

Defendants Thomas Greene 47th precinct NY PD

2. Court (if federal court, name the district; if state court, name the county) Bx NY

3. Docket or Index number \_\_\_\_\_

4. Name of Judge assigned to your case \_\_\_\_\_

5. Approximate date of filing lawsuit 2013

6. Is the case still pending? Yes ☐ No ☒

If NO, give the approximate date of disposition November 23, 2016

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) there was judgment in my favor

On  
other  
claims

- C. Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?

Yes ☒ No ☐

- D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff Marlon Roberts

Defendants 47th precinct John Doe

2. Court (if federal court, name the district; if state court, name the county) Bx NY

3. Docket or Index number \_\_\_\_\_

4. Name of Judge assigned to your case \_\_\_\_\_

5. Approximate date of filing lawsuit 2014



2. If you did not file a grievance but informed any officials of your claim, state who you informed, when and how, and their response, if any:

- G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.

**V. Relief:**

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount).

the amount of Monetary compensation I'm seeking is 250,000 for every day I have been incarcerated, pain and suffering, violation of my 14th and 8th and 14th amendment rights

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

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B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?

Yes \_\_\_\_ No \_\_\_\_ Do Not Know \_\_\_\_

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?

Yes \_\_\_\_ No \_\_\_\_ Do Not Know \_\_\_\_

If YES, which claim(s)?

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D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?

Yes \_\_\_\_ No \_\_\_\_

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes \_\_\_\_ No \_\_\_\_

E. If you did file a grievance, about the events described in this complaint, where did you file the grievance?

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1. Which claim(s) in this complaint did you grieve?

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2. What was the result, if any?

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3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process.

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F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here:

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Was  
anyone  
else  
involved?

Who else  
saw what  
happened?

**III. Injuries:**

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

N/A

**IV. Exhaustion of Administrative Remedies:**

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes \_\_\_\_ No ☒

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Defendant No. 2

Name John Doe Officers #2 Shield # \_\_\_\_\_  
 Where Currently Employed 47th Precinct NY PD  
 Address 4111 E 230th Laconia Ave 10467

Defendant No. 3

Name \_\_\_\_\_ Shield # \_\_\_\_\_  
 Where Currently Employed \_\_\_\_\_  
 Address \_\_\_\_\_

Who did  
what?

Defendant No. 4

Name \_\_\_\_\_ Shield # \_\_\_\_\_  
 Where Currently Employed \_\_\_\_\_  
 Address \_\_\_\_\_

Defendant No. 5

Name \_\_\_\_\_ Shield # \_\_\_\_\_  
 Where Currently Employed \_\_\_\_\_  
 Address \_\_\_\_\_

**II. Statement of Claim:**

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. In what institution did the events giving rise to your claim(s) occur?

N/A

B. Where in the institution did the events giving rise to your claim(s) occur?

N/A

C. What date and approximate time did the events giving rise to your claim(s) occur?

November 18, 2015 At approximately 12pm

D. Facts: On November 18, 2015 two 47th

precinct police officers falsely arrested  
me, and the charges were subsequently  
dismissed on March 1st 2017

What  
happened  
to you?



Markus Roberts # 73406054  
NCC  
150 Park Row  
NY, NY 10007

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NEW YORK NY 100

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Clerk, Pro Se Intake Unit  
United States District Court  
Southern District of New York  
The Daniel Patrick Moynihan  
United States Courthouse  
US Courthouse - 500 Pearl Street

01/09

